Facility Clearance (FCL) Request

Date of Request: _____

Defense Security Service
ATTN: Facility Clearance Branch
27130 Telegraph Road
Quantico, VA 22134
Scan and Email: occ.facilities@dss.mil
Please be advised, a company must have a valid procurement need to access classified information at the time of FCL sponsorship in order for DSS to accept this request. If the sponsored company is in the pre-award stage, access to classified information must be required in the pre-award stage in order for DSS to accept this request. Also, the access to classified information is required in the performance of the contract and not solely based on a need to access an area or building Additionally, if the company being sponsored is performing on a service contract, please review the following link for DSS guidance on Facility Clearance (FCLs) for service contracts, Industry Security Letter (ISL) 2006-
02 #8, prior to submission.
Link: http://www.dss.mil/documents/pressroom/isl_2006_L_2_august_22_2006.pdf
Please process the following facility for a Facility Clearance (FCL):
Legal Name of Facility:
CAGE Code:
CAGE Website: www.sam.gov (For detailed information on obtaining a CAGE Code)
Physical Address (no P.O. Boxes):
City: State and Zip Code:
Sponsored Company Website:
Is the Facility located on a Government Installation? Yes No
Does the Facility hold a Facility Clearance with another government agency? Yes No
If yes, please specify which government agency and level of facility clearance:
Level of Clearance Required:
Is Safeguarding Required? If so, what level?
Point of Contact (POC) at the Sponsored Facility: (Someone knowledgeable of Request)
(Someone knowledgeable of Request)
POC Telephone:
E-mail:

number 18.	
(Include copy of DD Form 254 issued from sponsor to sponsoree.)	
Is this request based on a sub-contract? Yes? No?	
If this is a sub-contract and you are requesting to share all or any of the following information: Contracting Intelligence Information, COMSEC or NATO information, per the NISPOM, you will need to observe the Contracting Activity (GCA) concurrence to share this information with the sponsore and provide this concurrence to DSS as part of your sponsorship request. If concurrence is not prequest will be rejected.	ed company
IF THIS REQUEST IS A SUB-CONTRACT, PLEASE PROVIDE GOVERNMENT CONT ACTIVITY (GCA) INFORMATION:	TRACTING
GCA POC Name:	
GCA POC Email:	
GCA POC Phone:	
Requestor CAGE Code (If you are a cleared contractor): Requestor POC Name: Requestor POC Email: Requestor POC Phone:	

occ.facilities@dss.mil, should you wish to discuss prior to submitting